AM 3M Company 651-575-3462 MAR 2 2 2011

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		ovative Properties of 33427	Company				·	(Signature)		
		Ma	rch 22,	2011		(Date)				
APPLICATION NO.	- T	ul, MN 55133-3427	DOCT NAMED BROWN			4770	RNEY DOCKET NO.	CONFIRMATION NO.		
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10/596,117 TITLE OF INVENTION:	05/31/2006	JTBD IMIDAZO RING I	Matthew R. Radmer C1271.70039US01 THERS 59368US010					2301		
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Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
PLEASE NOTE: Unk recordation as set forth	ess an assignee is ident in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on t T a substitute for filin	the pater	it. If an ass gnment.	ignee is id	lentified below, the do	cument has been filed for		
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3M INNOVATIVE PROPERTIES COMPANY ST PAUL MN 55133-3427										
lease check the appropri	ate assignee category of	categories (will not be p	rinted on the patent):	O In	dividual 🗵	Corporati	on or other private gro	up entity Government		
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Authorized Signature	Men A.	Sh			Date	arch 22	2, 2011			
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• •	St. Paul, MN 55133-3427				arch 22, 20			(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	ITOR		ATTOR	NEY DOCKET NO.	CONFIRMATION NO.	
10/596,117				hew R. Radmer C1271.70039US0				2301	
TILE OF INVENTION	: SULFONE SUBSTITU	ITED IMIDAZO RING E	ETHERS			59	368N2010		
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☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) 3M INNOVATIVE PROPERTIES COMPANY ST PAUL MN 55133-3427									
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ta. The following fee(s)	are submitted:	4	b. Payment of Fee(s):	(Plea	se first reapply a	ny previ	ously paid issue fee s	hown above)	
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Authorized Signature	: Men A.	<u> </u>			Date	ch 22	, 2011	· · · · · · · · · · · · · · · · · · ·	
Typed or printed nam	DEAN A. ERSF	ELD '			Registration I	No	5,689	<u> </u>	
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